Department of Navy (DON) Surveillance Advisory:
Enterovirus D68 (EV-D68)
25 September 2014

Issue

- Since mid-August 2014, several states in the United States (US) have been investigating increases in severe respiratory illness among children, potentially due to enterovirus D68 (EV-D68).
- While enteroviruses are a common cause of respiratory infections in the US, EV-D68 is not commonly implicated.
- Navy and Marine Corps Public Health Center (NMCPHC) respiratory illness surveillance and reporting strategy includes syndromic surveillance and reporting of suspect and confirmed outbreaks via Disease Reporting System internet (DRSi).

Background

EV-D68 causes mild to severe respiratory symptoms. Several states are investigating clusters of children with severe respiratory illness where EV-D68 is suspected. Furthermore, as of 24 September 2014, 32 states have reported patients with respiratory illness confirmed to be caused by EV-D68. The Centers for Disease Control and Prevention (CDC) is monitoring the situation; up-to-date case counts and affected states can be found by clicking here.

NMCPHC Surveillance and Reporting Guidance and Additional Resources

1. Per BUMEDINST 6220.12C, Navy and Marine Corps units providing patient care should report outbreaks of respiratory illnesses, including those potentially caused by EV-D68, in DRSi within 24 hours.
    a. Report outbreaks as an Outbreak Report in DRSi. Outbreak Reports should be submitted when a disease cluster or outbreak is suspected and then updated as additional information becomes available.
    b. For more information on reporting medical events, click here or contact the DRSi helpdesk: E-mail: NDRS@nmcphc.med.navy.mil; COMM: 757-953-0954; DSN: 377-0954.
2. Syndromic surveillance activities play an integral part in NMCPHC's respiratory illness surveillance and preparedness strategy.
    a. Navy MTFs should review surveillance protocols to ensure routine ESSENCE monitoring is included.
        i. Creating a pneumonia syndrome in ESSENCE may be useful in tracking severe respiratory illnesses. Click here for instructions on creating a user-defined pneumonia syndrome in ESSENCE.
    b. Units not recording data in an electronic clinical encounter record or not using a tool like ESSENCE to track disease trends locally can implement disease and injury (D&I) surveillance using the processes described here.
3. Contact the cognizant NEPMU if an outbreak of respiratory illness is suspected. NEPMUs can advise on and assist with case investigation activities, laboratory testing, and control measure implementation.
4. The CDC's EV-D68 web page is available for additional information about EV-D68 and other enteroviruses.